

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PATRIOT SUPER PAC

ADDRESS (number and street)

PO BOX 2506

☐ Check if different than previously reported. (ACC)

ASHBURN

VA

20146

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00509489

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2012M M M / D D D / Y Y Y Y Y Y  
01 01 2012M M M / D D D / Y Y Y Y Y Y  
01 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2012M M M / D D D / Y Y Y Y Y Y  
03 31 2012M M M / D D D / Y Y Y Y Y Y  
03 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Freiling

Signature of Treasurer

Thomas Freiling

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 10 2012M M M / D D D / Y Y Y Y Y Y  
04 10 2012M M M / D D D / Y Y Y Y Y Y  
04 10 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PATRIOT SUPER PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	73365.00	73365.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	73365.00	73365.00
7. Total Disbursements (from Line 31) .....	53131.29	53131.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	20233.71	20233.71
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**PATRIOT SUPER PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
01	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y Y Y
03	/	31	/	2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

16050.00

16050.00

(ii) Unitemized .....

49985.00

49985.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

66035.00

66035.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

66035.00

66035.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

7000.00

7000.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

110.00

110.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

220.00

220.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

73365.00

73365.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

73365.00

73365.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	46131.29	46131.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	46131.29	46131.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	7000.00	7000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	53131.29	53131.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53131.29	53131.29

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	66035.00	66035.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	66035.00	66035.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	46131.29	46131.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	110.00	110.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	46021.29	46021.29

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial) <b>A. HAROLD ALLEN</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2012 <b>Transaction ID : 2046</b>	
Mailing Address 713 WAKEFIELD			Amount of Each Receipt this Period 500.00	
City EL PASO	State TX	Zip Code 79922		
FEC ID number of contributing federal political committee. C				
Name of Employer MMI		Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) <b>B. ROESER BETTE</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2012 <b>Transaction ID : 1957</b>	
Mailing Address 36 BRINKER ROAD			Amount of Each Receipt this Period 250.00	
City BARRINGTON HILLS	State IL	Zip Code 60010		
FEC ID number of contributing federal political committee. C				
Name of Employer NONE		Occupation NONE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) <b>C. BARBARA BILLINGSLEY</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2012 <b>Transaction ID : 1752</b>	
Mailing Address 13018 HEIMER RD #301			Amount of Each Receipt this Period 500.00	
City SAN ANTONIO	State TX	Zip Code 78216		
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1250.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

## **A. BARBARA BILLINGSLEY**

Mailing Address 13018 HEIMER RD #301

City State Zip Code  
 SAN ANTONIO TX 78216

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 29 2012

Transaction ID : 2403

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. SHEILA BLUDWORTH**

Mailing Address 2118 COUNTRY CLUB DR

City State Zip Code  
 PEARLAND TX 77581

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 28 2012

Transaction ID : 1261

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. BECKY DAVIS**

Mailing Address 19827 CYPRESS CHURCH RD.

City State Zip Code  
 CYPRESS TX 77433

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

RANCH MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 30 2012

Transaction ID : 2427

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Steve Elliott**

Mailing Address 4707 Harlequin Way

City

Chesapeake

State

VA

Zip Code

23321

FEC ID number of contributing federal political committee.

C

Name of Employer

Grassfire Action Inc

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2012

Transaction ID : 2474

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Thomas Freiling**

Mailing Address P O Box 2506

City

Ashburn

State

VA

Zip Code

20146

FEC ID number of contributing federal political committee.

C

Name of Employer

Patriot Super PAC

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2012

Transaction ID : 2472

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. RICHARD HARPER**

Mailing Address 3824 SHAWNEE RUN SW

City

LILBURN

State

GA

Zip Code

30047

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2012

Transaction ID : 1006

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10200.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial) <b>A. CAROL HOFFMAN</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 26 / 2012</div> </div>	
Mailing Address 1854 W. CAPE COD WAY			<b>Transaction ID : 1017</b>	
City LITTLETON	State CO	Zip Code 80120	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. REBECCA KRENZKE</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>03 / 24 / 2012</div> </div>	
Mailing Address 5603 COUNTRY GREEN ST.			<b>Transaction ID : 2086</b>	
City LEAGUE CITY	State TX	Zip Code 77573	Amount of Each Receipt this Period <div> <div>300.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer RIG UP SERVICES		Occupation CONTROLLER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C. DIANA KRUGLICK</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>03 / 26 / 2012</div> </div>	
Mailing Address 825 S WAUKEGAN RD PMB 158			<b>Transaction ID : 2116</b>	
City LAKE FOREST	State IL	Zip Code 60045	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

<b>A. W. LAIRD</b> Full Name (Last, First, Middle Initial) Mailing Address 7777 FOREST LANE C-855 City DALLAS State TX Zip Code 75230 FEC ID number of contributing federal political committee. C Name of Employer SELF Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2012 <b>Transaction ID : 2206</b> Amount of Each Receipt this Period 250.00		
<b>B. TOM MONCRIEF</b> Full Name (Last, First, Middle Initial) Mailing Address 950 COMMERCE STL City FORT WORTH State TX Zip Code 76102 FEC ID number of contributing federal political committee. C Name of Employer MONCRIEF OIL Occupation OIL & GAS PRODUCER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2012 <b>Transaction ID : 1513</b> Amount of Each Receipt this Period 250.00		
<b>c. C I Murphy</b> Full Name (Last, First, Middle Initial) Mailing Address P O Box 75006 City Dayton State OH Zip Code 45475 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2012 <b>Transaction ID : 2223</b> Amount of Each Receipt this Period 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			750.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)  
**A. CATHERINE MURPHY**

Mailing Address **8825 BIRKDALE HILLS CIR**

City State Zip Code  
**DAYTON OH 45458**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**NONE**

Occupation

**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 20 / 2012**

**Transaction ID : 1983**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)  
**B. NEAL POLAN**

Mailing Address **707 PEARL ST**

City State Zip Code  
**TORRANCE CA 90277**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**AFFORDABLE CLASSICS**

Occupation

**PRESIDENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 30 / 2012**

**Transaction ID : 2437**

Amount of Each Receipt this Period

**250.00**

Full Name (Last, First, Middle Initial)  
**C. PATRICK PURCELL**

Mailing Address **3566 14TH AVENUE S.**

City State Zip Code  
**GRAND FORKS ND 58201**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**PATRICK PURCELL**

Occupation

**SALES**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**02 / 29 / 2012**

**Transaction ID : 1279**

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**750.00**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

## **A. JOAN SECREST**

Mailing Address 3880 BO TREE RD

City State Zip Code  
 JACKSONVILLE FL 32210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

POSTAL CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 27 / 2012

Transaction ID : 2243

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. PAUL SPENCER**

Mailing Address 19475 BEACON LITE ROAD

City State Zip Code  
 MONUMENT CO 80132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CRUISER ACCESSORIES,LLC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 14 / 2012

Transaction ID : 1646

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. MRS. WAREING**

Mailing Address 3511 DEL MONTE

City State Zip Code  
 HOUSTON TX 77019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

HOUSEWIFE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 15 / 2012

Transaction ID : 1872

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial) <b>A. LEONARD YOUNG</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>03 / 14 / 2012</div> </div> <b>Transaction ID : 1511</b>		
Mailing Address 6714 SPANISH MOSS DR.					
City	State	Zip Code			
KEYSTONE HEIGHTS	FL	32656			
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
NONE		NONE			
Receipt For:		Aggregate Year-to-Date ▼			
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		250.00			
Full Name (Last, First, Middle Initial) <b>B. LEONARD YOUNG</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>03 / 14 / 2012</div> </div> <b>Transaction ID : 1669</b>		
Mailing Address 6714 SPANISH MOSS DR.					
City	State	Zip Code			
KEYSTONE HEIGHTS	FL	32656			
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
NONE		NONE			
Receipt For:		Aggregate Year-to-Date ▼			
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		300.00			
Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div> / / </div> </div>		
Mailing Address					
City	State	Zip Code			
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
Receipt For:		Aggregate Year-to-Date ▼			
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			300.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			16050.00		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 24  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

<p>Full Name (Last, First, Middle Initial)  <b>A. Thomas Freiling</b></p> <p>Mailing Address P O Box 2506</p> <p>City Ashburn State VA Zip Code 20146</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Patriot Super PAC Occupation Treasurer</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">7000.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  01 / 27 / 2012</p> <p><b>Transaction ID : 2489</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">7000.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>B.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">7000.00</span></p> <p><span style="border: 1px solid black; padding: 2px;">7000.00</span></p>		



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 24

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Expedia**

Mailing Address 333 108th Avenue NE

City Bellevue      State WA      Zip Code 98004

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      06      2012
**Transaction ID : 2454**

Amount of Each Disbursement this Period

228.86

Full Name (Last, First, Middle Initial)

**B. Expedia**

Mailing Address 333 108th Avenue NE

City Bellevue      State WA      Zip Code 98004

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      21      2012
**Transaction ID : 2455**

Amount of Each Disbursement this Period

169.61

Full Name (Last, First, Middle Initial)

**C. Expedia**

Mailing Address 333 108th Avenue NE

City Bellevue      State WA      Zip Code 98004

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      26      2012
**Transaction ID : 2456**

Amount of Each Disbursement this Period

147.97

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

546.44



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 24

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas Freiling**

Mailing Address P O Box 2506

City

Ashburn

State

VA

Zip Code

20146

Purpose of Disbursement

Travel expense reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

15

2012

**Transaction ID : 2475**

Amount of Each Disbursement this Period

1417.25

Full Name (Last, First, Middle Initial)

**B. Grassroots Action Inc.**

Mailing Address 90 Main Street

City

Maxwell

State

IA

Zip Code

50161

Purpose of Disbursement

Fundraising expense

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

20

2012

**Transaction ID : 2458**

Amount of Each Disbursement this Period

13446.24

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address Internal Revenue Service Center

City

Austin

State

TX

Zip Code

73301

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

06

2012

**Transaction ID : 2459**

Amount of Each Disbursement this Period

429.23

**SUBTOTAL** of Disbursements This Page (optional)..... ►

15292.72

**TOTAL** This Period (last page this line number only)..... ►

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PATRIOT SUPER PAC

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Sally J Perez**

Mailing Address 21548 Bankbarn Terrace

City	State	Zip Code
Ashburn	VA	20148

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2012

**Transaction ID : 1412**

Amount of Each Disbursement this Period

903.07
--------

Full Name (Last, First, Middle Initial)

**B. Sally J Perez**

Mailing Address 21548 Bankbarn Terrace

City	State	Zip Code
Ashburn	VA	20148

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2012

**Transaction ID : 1413**

Amount of Each Disbursement this Period

1106.87
---------

Full Name (Last, First, Middle Initial)

**C. Sally J Perez**

Mailing Address 21548 Bankbarn Terrace

City	State	Zip Code
Ashburn	VA	20148

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2012

**Transaction ID : 2466**

Amount of Each Disbursement this Period

1106.86
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3116.80
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## PATRIOT SUPER PAC

#### A. Sullivan & Associates PLLC

Category/  
Type

3500.00

State:  District:

Full Name (Last, First, Middle Initial)

### B. U S Airways

Date of Disbursement

MM / DD / YYYY

Mailing Address 400 E Sky Harbor Blvd

City	State	Zip Code
Phoenix	AZ	85034

Purpose of Disbursement
Travel

Candidate Name

Category/  
Type

Transaction ID : 2476

Amount of Each Disbursement this Period

310.10

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C. Wood Street Inc.**

Date of Disbursement

Mailing Address 201A Broadway St

City	State	Zip Code
Frederick	MD	21701

### Purpose of Disbursement Website

Candidate Name

Category/  
Type

Transaction ID : 1410

Amount of Each Disbursement this Period

5000.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8810.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Wood Street Inc.**

Mailing Address 201A Broadway St

City	State	Zip Code
Frederick	MD	21701

Purpose of Disbursement  
Website

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2012

**Transaction ID : 1411**

Amount of Each Disbursement this Period

4950.00
---------

Full Name (Last, First, Middle Initial)

**B. Wood Street Inc.**

Mailing Address 201A Broadway St

City	State	Zip Code
Frederick	MD	21701

Purpose of Disbursement  
Website

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2012

**Transaction ID : 1424**

Amount of Each Disbursement this Period

50.00
-------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00
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45109.74
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 24

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☒ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**PATRIOT SUPER PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas Freiling**

Mailing Address P O Box 2506

City Ashburn State VA Zip Code 20146

Purpose of Disbursement  
Loan Repayment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2012

**Transaction ID : 2490**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. Thomas Freiling**

Mailing Address P O Box 2506

City Ashburn State VA Zip Code 20146

Purpose of Disbursement  
Loan Repayment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2012

**Transaction ID : 2491**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7000.00

7000.00

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 24 OF 24

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : 2473

**PATRIOT SUPER PAC****LOAN SOURCE** Full Name (Last, First, Middle Initial)

Thomas Freiling

**[PERSONAL FUNDS]**

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address P O Box 2506

City Ashburn

State VA

ZIP Code 20146

Original Amount of Loan

7000.00

Cumulative Payment To Date

7000.00

Balance Outstanding at Close of This Period

0.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
01 / 27 / 2012

Date Due

M M / D D / Y Y Y Y

On Demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

**TOTALS** This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.